

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

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OMB APPROVAL					
OMB Number: Expires::	3235-0076				
Estimated average burden					
hours per response	16.00				
SEC USE ON	LY				
Prefix	Serial				
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DATE RECEIVE	D				

UNIFORM LIMITED OF	FFERING EXEMPTION
Name of Offering ( check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if this is an amendment and name has check if the check if this is an amendment and name has check if the check if t	anged, and indicate change.)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Type of Filing: New Filing Amendment	Rule 506  Section 4(6)  ULOE
A. BASIC IDEN	TIFICATION DATA
1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has cl  HRJ Capital VC V, L.P.	hanged, and indicate change.) 07075244
Address of Executive Offices (Number and Street 2965 Woodside Road, Woodside, CA 94062	et, City, State, Zip Code) Telephone rounder (meruang roca code) (650) 327-5023
Address of Principal Business Operations (Number and Street (if different from Executive Offices)	et, City, State, Zip Code)  Telephone Number (Including Area Code)
Brief Description of Business Private Equity Investment	b
Type of Business Organization  corporation business trust limited partnership, already for limited partnership, to be form	
Actual or Estimated Date of Incorporation or Organization:  Month  0 8  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Post. CN for Canada; FN for other	Year  O 6  Actual  Estimated  HOMSON  r foreign jurisdiction)  AUG 2 3 2007  Estimated  HOMSON  FINANCIAL
77d(6).	exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicted on the filing of a federal notice.

> Persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

### **BASIC IDENTIFICATION DATA** A. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) HRJ VC V Management, L.L.C. (Number and Street, City, State, Zip Code) **Business or Residence Address** 2965 Woodside Road, Woodside, CA 94062 Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Barton, Harris **Business or Residence Address** (Number and Street, City, State, Zip Code) 2965 Woodside Road, Woodside, CA 94062 Executive Officer □ Director General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner $\Box$ Managing Partner Full Name (Last name first, if individual) Lott, Ronnie (Number and Street, City, State, Zip Code) **Business or Residence Address** 2965 Woodside Road, Woodside, CA 94062 Beneficial Owner **Executive Officer** ☐ Director $\Box$ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) **Executive Officer** General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFORMA	ÀTÌON AB	OUT OFFE	RING				
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l.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						⋈						
2.						\$	n/a						
	2. What is the minimum investment that will be accepted from any individual?					Yes	No						
3.												$\boxtimes$	
4.						vho has bee f purchasers							
						of a broker							
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				Solicited or	Intends to S	olicit Purch	asers		<u>-</u>				
((	Check "/	All States" o	or check ind	ividuals Stat	es)		•••••					□ A	ll States
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	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (	Last name f	first, if indiv	idual)				•					
Bus	iness or	Residence /	Address (Nu	mber and St	reet, City, S	State, Zip Co	ode)				. <u></u>		
Nan	ne of As	sociated Bro	oker or Deal	er			<del></del>			<u> </u>	<del> </del>		
Stat	es in Wh	nich Person	Listed Has	Solicited or	Intends to S	olicit Purcha	asers						<del></del>
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	[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HII)	[ID]
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Full	Name (	Last name f	irst, if indiv	idual)								-	
Bus	iness or	Residence A	Address (Nu	mber and St	reet, City, S	State, Zip Co	ode)						
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:	[IL]	[IN]	[JA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT]	[NE]	[NV]	[NH]	[[[]	[NM]	[NY]	[NC]	[ND]	[OH]	{OK}	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	F PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
,	Debt	\$	\$
	. Equity	· <b>\$</b>	\$
	☐ Common ☐ Preferred		•
	Convertible Securities (including warrants)	\$	<b>s</b>
	Partnership Interests		\$ <u>143,666,500.00</u>
	Other (Specify)	\$	\$
	Total	\$ <u>143,666,500.00</u>	\$143,666,500.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited investors	129	\$ <u>143,666,500.00</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		·
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	⊠	\$ 25,000.00
	Accounting Fees		\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$
	10(a)	<b>–</b>	<u> </u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	USE OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C — Questi and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjugross proceeds to the issuer."	isted	\$143,641,500.00
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be ueach of the purposes shown. If the amount for any purpose is not known, furnish an estimate and the box to the left of the estimate. The total of the payments listed must equal the adjusted gross p to the issuer set forth in response to Part C — Question 4.b above.	d check	
	Payments to Officers, Directors & Affiliates	Payments To Others
Salaries and fees	s	<b>\$</b>
Purchase of real estate		<b>S</b>
Purchase, rental or leasing and installation of machinery and equipment	s	<b>\$</b>
Construction or leasing of plant buildings and facilities		<b>\$</b>
Acquisition of other businesses (including the value of securities involved in this offering that may used in exchange for the assets or securities of another issuer pursuant to a merger)	be	□ s
Repayment of indebtedness	D \$	□ s
Working capital		\$ <u>143,641,500.00</u>
Other (specify):		□ \$
Column Totals	🗖 \$	\$143,641,500.00
Total Payments Listed (column totals added)	□ \$143.64	11 500 00

[FEDERAL SIGNATURE PAGE FOLLOWS]

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•	D.	FEDER	AE SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature (2)	Date		
HRJ Capital VC V, L.P.	any fril	8/15/07		
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Cory Pavlik	Director of Finance of HRJ VC V Management, L.L.C., General Partner of the Issuer			

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

 $\mathcal{END}$